



# **Provider Communication**

Subject:	Dispensing Fee Incentive Program Termination	Priority:	High
Date:	June 9, 2005	Message ID:	ACSBNR06092005_2

#### Dear Provider:

## **Dispensing Fee Incentive Program Termination**

### Generic Incentive Fee Program Discontinuing Beginning with Claims Date of Service July 1, 2005

Please be advised that due to legislative action, the generic incentive fee program for Georgia Medicaid-Peachcare for kids will be discontinued beginning with dates of service of July 1, 2005.

### **New GMAC Changes Effective 07/01/05**

several changes to the GMAC list will become effective on 07/01/05. They include price decreases, increases, and additions. The July 1, 2005 GMAC listing will be available for review on or before June 1, 2005 at www.ghp.georgia.gov. Go to providers, then pharmacy overview, and click on to GMAC listing.

## New Georgia Watch Form- Replaces Current FDA Med Watch Form

Please be advised that the new Georgia Watch Form will be available on the community health Website at www.dch.state.ga.us. Click onto providers, and then look under "What's New". The new Georgia Watch Form will be available at the above web location beginning Friday, June 10th, 2005. This form can be completed and submitted to express scripts to request the brand name drug of a multiple source generic. ESI will continue to accept the current FDA Med Watch Form until October 2005. For all other prior authorization requests, not requiring completion of a Georgia Watch Form please call 1-877-650-9340

#### Revised Date: Prior Authorization Update-Fentanyl Patches Effective May 14 2005

Fentanyl patches will require a prior authorization effective May 14, 2005. Rebates from the brand duragesic product decrease the total drug cost to the state beyond the generic reimbursement. We will closely monitor these costs and will notify your pharmacy of any changes.

#### Pharmacy Advisory Committee Request for Nominations: Deadline Extended

Medicaid has extended the deadline for receipt of nominations to the pharmacy advisory committee to June 30<sup>th</sup>, 2005. Nominations should be submitted no later than June 30<sup>th</sup>, 2005 to:





Pharmacy Services
Medicaid Division
Patricia Jeter, Mpa, RPh
2 Peachtree Street, 37<sup>th</sup> Floor
Atlanta, Georgia 30303

Please share this information with appropriate staff. If you are the corporate office of a chain pharmacy, please provide this information to each of your stores located in Georgia. Please contact the medicaid pharmacy unit at 404-656-4044 should you have questions or require clarification.

Sincerely,

Georgia Department of Community Health, Division of Medical Assistance